Document

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Filed in U.S. Bankruptcy Court
Northern District of Georgia
Vania S. Allen, Clerk

Debtor 2	First Name	Middle Name	Last Name	
Debtor 2			Last Haille	
JUDIUI -		4		
Spouse, if filing)	First Name	Middle Name	Last Name	
		the: Northern District of Georgia	a	~
Case number	23-56465			

JUL 1 3 2023

By: Deputy Clerk

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Give Details About Your Marital Stat	us and Where Yo	ou Lived Before	
□м	is your current marital status? arried ot married			
☑ N	g the last 3 years, have you lived anywhere of o es. List all of the places you lived in the last 3 years.			
	Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
	150 Hutchinson St Ne Number Street Unit 711	From 03/20/2000		From
	Atlanta Ga 30307 City State ZIP Code	×	City State ZIP Code	
	Number Street	From	Number Street	Same as Debtor 1 From To
	City State ZIP Code		City State ZIP Code	Community property
state	s and territories include Arizona, California, Idal	no, Louisiana, Nevad	valent in a community property state or territory? (0 da, New Mexico, Puerto Rico, Texas, Washington, and m 106H).	ommunity property Wisconsin.)

Part 2:

Explain the Sources of Your Income

1 Calvin Joseph	Datrice	Case nun	nber (if known) 23-56465	
First Name Middle Name Last Na	ame			
Did you have any income from employment Fill in the total amount of income you received Fyou are filing a joint case and you have incor	from all jobs and all busing	nesses, including part-tin	ne activities.	ndar years?
☐ No ☐ Yes. Fill in the details.			•	
4 Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips☑ Operating a business	\$600.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
For last calendar year:	Wages, commissions, bonuses, tips	\$ 14,057.00	Wages, commissions, bonuses, tips	\$
(January 1 to December 31,2022 YYYY	Operating a business	*	Operating a business	
For the calendar year before that:	✓ Wages, commissions, bonuses, tips	s 47,184.88	☐ Wages, commissions, bonuses, tips	4
	Operating a business	\$	Operating a business	Ψ
nclude income regardless of whether that inconnemployment, and other public benefit paym gambling and lottery winnings. If you are filing	nis year or the two previone is taxable. Examples ents; pensions; rental incapions a joint case and you hav	s of other income are alin ome; interest; dividends; e income that you receiv	money collected from laws ed together, list it only once	suits; royalties; and
(January 1 to December 31, 2021 Did you receive any other income during the notion of	nis year or the two previone is taxable. Examples ents; pensions; rental incapions a joint case and you hav	s of other income are alin ome; interest; dividends; e income that you receiv	money collected from laws ed together, list it only once	suits; royalties; and
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Did you receive any other income during the include income regardless of whether that income public benefit paymed gambling and lottery winnings. If you are filing List each source and the gross income from e inc	nis year or the two previone is taxable. Examples ents; pensions; rental inc a joint case and you hav ach source separately. D Debtor 1 Sources of income	s of other income are alinome; interest; dividends; e income that you receiv o not include income that Gross income from each source (before deductions and	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income	suits; royalties; and a under Debtor 1. Gross income from each source (before deductions and
Did you receive any other income during the include income regardless of whether that income public benefit paymed gambling and lottery winnings. If you are filing List each source and the gross income from e income in the gross income from e in the gross. Fill in the details.	nis year or the two previone is taxable. Examples ents; pensions; rental inc a joint case and you hav ach source separately. D Debtor 1 Sources of income	s of other income are alinome; interest; dividends; e income that you receiv o not include income that Gross income from each source (before deductions and	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income	suits; royalties; and a under Debtor 1. Gross income from each source (before deductions and
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Did you receive any other income during the include income regardless of whether that income properties of whether that income properties and other public benefit paymer gambling and lottery winnings. If you are filling that each source and the gross income from each of the properties. No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,2022)	nis year or the two previone is taxable. Examples ents; pensions; rental inc a joint case and you hav ach source separately. D Debtor 1 Sources of income	s of other income are alinome; interest; dividends; e income that you receiv o not include income that Gross income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
Did you receive any other income during the include income regardless of whether that income purpose and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	nis year or the two previone is taxable. Examples ents; pensions; rental inc a joint case and you hav ach source separately. D Debtor 1 Sources of income	s of other income are alinome; interest; dividends; e income that you receiv o not include income that Gross income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once t you listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
Did you receive any other income during the include income regardless of whether that income purpose and other public benefit paying gambling and lottery winnings. If you are filling List each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,2022	nis year or the two previone is taxable. Examples ents; pensions; rental inc a joint case and you hav ach source separately. D Debtor 1 Sources of income	Gross income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once tyou listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
Did you receive any other income during the include income regardless of whether that income properties of whether that income properties and other public benefit paymer gambling and lottery winnings. If you are filling that each source and the gross income from each of the properties. No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31,2022)	nis year or the two previone is taxable. Examples ents; pensions; rental inc a joint case and you hav ach source separately. D Debtor 1 Sources of income	s of other income are alinome; interest; dividends; e income that you receiv o not include income that Gross income from each source (before deductions and exclusions) \$	money collected from laws ed together, list it only once tyou listed in line 4. Debtor 2 Sources of income Describe below.	Gross income from each source (before deductions and exclusions) - \$

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Datrice

Joseph

Case number (if known) 23-56465

List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more? No. Go to line 7. Q Yes. List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment ☐ Mortgage Creditor's Name ☐ Car Credit card Number Street Loan repayment ☐ Suppliers or vendors Other City State ZIP Code ☐ Mortgage Creditor's Name ☐ Car ☐ Credit card Number Street ☐ Loan repayment ☐ Suppliers or vendors Other State ZIP Code ■ Mortgage Creditor's Name ☐ Car ☐ Credit card Number Street Loan repayment ☐ Suppliers or vendors Other City State ZIP Code

Calvin

Debtor 1

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23-56465

Datrice

Joseph

Calvin

Vithin 1 v	vear before you	filed for bankruptcy, did ye	ou make a pav	ment on a debt v	ou owed anvone w	vho was an insider?
		ves; any general partners; re				
						securities; and any managing
						domestic support obligations,
	hild support and		olo propriotori		р,	,
	ina capport and	a				
No No						
Yes. L	ist all payments	to an insider.				
			Dates of	Total amount	Amount you still	Reason for this payment
			payment	paid	owe	
(maida	er's Name			\$	\$	
inside	er s Name					
Numb	per Street					
-						
City		State ZIP Code				
				Secretaria de la companya della companya della companya de la companya della comp		
				\$	\$	
Inside	er's Name		-			
Numb	per Street					
					,	
City		State ZIP Code				
City		State ZIP Code				
	year before you		ou make any p	ayments or trans	sfer any property o	n account of a debt that benefited
			ou make any p	ayments or trans	sfer any property o	n account of a debt that benefited
Within 1.y	er?			ayments or trans	efer any property o	n account of a debt that benefited
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Datrice

23-56465

Case number (if kno

			vsuit, court action, or adminis orces, collection suits, paternity			dy modificat
res. I'lli iii the details.	Natura	of the case	Court or agency		State	is of the case
	Nature	of the case	Court or agency		Statt	is of the case
Case title					D F	ending
Case title			Court Name			n appeal
			Number Street			Concluded
0			Trained Street			7011014404
Case number	***************************************		City State	ZIP Code		
	A					Pending
Case title			Court Name			-
						On appeal
			Number Street		L	Concluded
Case number	-		City State	ZIP Code		
No. Go to line 11.	details below.		repossessed, foreclosed, garn			
No. Go to line 11.	details below.	Describe the propert		Date	Value o	
No. Go to line 11.	details below.					
No. Go to line 11. Yes. Fill in the information below	details below.	Describe the propert	y		Value o	of the property
No. Go to line 11. Yes. Fill in the information belonger of the control of the c	details below.	Describe the propert	y		Value o	
	details below.	Describe the propert Explain what happer	y ned epossessed.		Value o	
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Calvin

Debtor 1

Joseph

r 1	Calvin	Joseph	Datrice	Case number (if know	_{m)} 23-56465	
	First Name Mid	Idle Name Last N	ame			
Λ/i÷	hin 90 days hefore v	ou filed for hankrun	tey did any creditor includ	ing a bank or financial instit	tution set off any ar	mounts from your
			ause you owed a debt?	ing a bank of infancial instit	idilon, set on any ar	nounts nom your
Ą			manager and the second			
_	Yes. Fill in the details					
					×	
			Describe the action the credi	tor took	Date action was taken	Amount
	Creditor's Name					
	Number Street					\$
					4	
	City	State ZIP Code	Last 4 digits of account nun	nber: XXXX	_	
			cy, was any of your property stodian, or another official?	in the possession of an as	signee for the benef	tit of
	No	inteu receiver, a cus	todian, or another official:	*		
	Yes					
_	165					
rt 5	List Certain G	ifts and Contribut	tions			
V			tcy, did you give any gifts w	ith a total value of more tha	n \$600 per person?	
V	No Yes. Fill in the details Gifts with a total valu	o for each gift.	ccy, did you give any girts w Describe the gifts	ith a total value of more tha	Dates you gave	Value
V	No Yes. Fill in the details	o for each gift.		ith a total value of more tha	,	Value
V	No Yes. Fill in the details Gifts with a total valu	o for each gift.		ith a total value of more tha	Dates you gave	Value
V	No Yes. Fill in the details Gifts with a total valu per person	s for each gift.		ith a total value of more tha	Dates you gave	Value \$
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V	No Yes. Fill in the details Gifts with a total value per person Person to Whom You Gave Number Street City Person's relationship to Gifts with a total value per person	s for each gift. se of more than \$600 the Gift State ZIP Code you of more than \$600	Describe the gifts	ith a total value of more than	Dates you gave the gifts	\$\$
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or 1	Calvin	Joseph	Datrice	Case number (if known) 2	3-30403	
	First Name	Middle Name Last Na	ime			+
With	in 2 years before	you filed for bankrupt	cy, did you give any gifts or co	ntributions with a total value	e of more than \$60	00 to any charity?
V I	No					
		ails for each gift or contri	bution.			
	Gifts or contribution		Describe what you contributed		Date you	Value
	that total more tha	ın \$600			contributed	
						\$
(Charity's Name					
			*			\$
•					-	Ψ
ī	Number Street					
			*			
,						
(City State	ZIP Code				
		,				
rt 6	List Certai	in Losses				
		The state of the s				
	how the loss occu	perty you lost and urred	Describe any insurance coverage include the amount that insurance claims on line 33 of Schedule AR:	has paid. List pending insurance	Date of your loss	Value of property lost
r				has paid. List pending insurance		
Summanners.			Include the amount that insurance	has paid. List pending insurance		
			Include the amount that insurance	has paid. List pending insurance		
			Include the amount that insurance	has paid. List pending insurance		
***************************************	how the loss occu	urred	Include the amount that insurance claims on line 33 of Schedule A/B:	has paid. List pending insurance		
rt 7	how the loss occu		Include the amount that insurance claims on line 33 of Schedule A/B:	has paid. List pending insurance		
	how the loss occu	n Payments or Trans	Include the amount that insurance claims on line 33 of Schedule A/B:	has paid. List pending insurance Property.	loss	\$
Witi you	List Certair hin 1 year before a consulted about	n Payments or Trans you filed for bankrupto t seeking bankruptcy o	Include the amount that insurance claims on line 33 of Schedule A/B: ifers cy, did you or anyone else actir r preparing a bankruptcy petitic	has paid. List pending insurance Property. ng on your behalf pay or train	nsfer any property	\$
Witi you	List Certair hin 1 year before a consulted about	n Payments or Trans you filed for bankrupto t seeking bankruptcy o	Include the amount that insurance claims on line 33 of Schedule A/B: sfers cy, did you or anyone else actir	has paid. List pending insurance Property. ng on your behalf pay or train	nsfer any property	\$
Witi you Incl	List Certair hin 1 year before i consulted about ude any attorneys	n Payments or Trans you filed for bankrupto t seeking bankruptcy o	Include the amount that insurance claims on line 33 of Schedule A/B: ifers cy, did you or anyone else actir r preparing a bankruptcy petitic	has paid. List pending insurance Property. ng on your behalf pay or train	nsfer any property	\$
With you Incl	List Certain hin 1 year before a consulted about ude any attorneys No	n Payments or Trans you filed for bankrupto t seeking bankruptcy o s, bankruptcy petition pre	Include the amount that insurance claims on line 33 of Schedule A/B: ifers cy, did you or anyone else actir r preparing a bankruptcy petitic	has paid. List pending insurance Property. ng on your behalf pay or train	loss	\$
With you Incl	List Certair hin 1 year before i consulted about ude any attorneys	n Payments or Trans you filed for bankrupto t seeking bankruptcy o s, bankruptcy petition pre	Include the amount that insurance claims on line 33 of Schedule A/B: sfers cy, did you or anyone else actir r preparing a bankruptcy petitioparers, or credit counseling agen	has paid. List pending insurance Property. Ing on your behalf pay or training on your behalf pay or training on? In the property of the pro	nsfer any property	\$to anyone
With you Incl	List Certain hin 1 year before a consulted about ude any attorneys No	n Payments or Trans you filed for bankrupto t seeking bankruptcy o s, bankruptcy petition pre	Include the amount that insurance claims on line 33 of Schedule A/B: ifers cy, did you or anyone else actir r preparing a bankruptcy petitic	has paid. List pending insurance Property. Ing on your behalf pay or training on your behalf pay or training on? In the property of the pro	nsfer any property our bankruptcy. Date payment or	\$to anyone
With you Incl	List Certain hin 1 year before a consulted about ude any attorneys No	n Payments or Trans you filed for bankrupto t seeking bankruptoy o s, bankruptcy petition pre tails.	Include the amount that insurance claims on line 33 of Schedule A/B: sfers cy, did you or anyone else actir r preparing a bankruptcy petitioparers, or credit counseling agen	has paid. List pending insurance Property. Ing on your behalf pay or training on your behalf pay or training on? In the property of the pro	nsfer any property	\$to anyone
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you Incl	List Certain hin 1 year before a consulted about ude any attorneys No Yes. Fill in the det Person Who Was Pai	n Payments or Trans you filed for bankruptcy o to seeking bankruptcy o to bankruptcy petition prepetition prepetition tails.	Include the amount that insurance claims on line 33 of Schedule A/B: sfers cy, did you or anyone else actir r preparing a bankruptcy petitioparers, or credit counseling agen	has paid. List pending insurance Property. Ing on your behalf pay or training on your behalf pay or training on? In the property of the pro	nsfer any property our bankruptcy. Date payment or transfer was	\$to anyone

	Calvin First Name	Joseph Middle Name Last Na	Datrice	Case number (if known)_	23-30403	
	First Name	Middle Name Last Na	ame			
***************************************			Description and value of any prope	rty transferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid					
						\$
	Number Street	,	44444			\$
	City	State ZIP Code				
	Email or website addre	ss				
	Person Who Made the	Payment, if Not You	observation in the state of the			
	, 5,55,7,7,1,5,7,1,44,5,41,1	, aymon, ii max i aa			and the second	
1		yment or transfer that yo ails.				
			Description and value of any prope	rty transferred	Date payment or transfer was made	Amount of paym
	Person Who Was Paid	d			Illade	
	Number Street					\$
			2			\$
	City	State ZIP Code				
ran nclu Do u	hin 2 years before asferred in the ord ude both outright to not include gifts an	e you filed for bankrup dinary course of your b ransfers and transfers m nd transfers that you hav	tcy, did you sell, trade, or otherwousiness or financial affairs? nade as security (such as the grantive already listed on this statement.			
ran nclu Do u ☑	nin 2 years before asferred in the ord ude both outright to not include gifts an No	e you filed for bankrup dinary course of your b ransfers and transfers m nd transfers that you hav	ousiness or financial affairs? nade as security (such as the granti	ng of a security interest or	mortgage on your pro	operty).
ran nclu o u	nin 2 years before asferred in the ord ude both outright to not include gifts an No	e you filed for bankrup dinary course of your b ransfers and transfers m and transfers that you hav ails.	pusiness or financial affairs? nade as security (such as the grantion and as the grantion and the statement. Description and value of property	ng of a security interest or Describe any proper	mortgage on your pro	operty).
ran nclu Do u	nin 2 years before asferred in the ord ude both outright to not include gifts an No Yes. Fill in the deta	e you filed for bankrup dinary course of your b ransfers and transfers m and transfers that you hav ails.	pusiness or financial affairs? nade as security (such as the grantion and as the grantion and the statement. Description and value of property	ng of a security interest or Describe any proper	mortgage on your pro	operty).
ran nclu Do u	nin 2 years before isferred in the ordude both outright to not include gifts an No Yes. Fill in the deta	e you filed for bankrup dinary course of your b ransfers and transfers m and transfers that you hav ails.	pusiness or financial affairs? nade as security (such as the grantion and as the grantion and the statement. Description and value of property	ng of a security interest or Describe any proper	mortgage on your pro	operty).
ran nclu Do u	nin 2 years before isferred in the ordude both outright to not include gifts an No Yes. Fill in the deta	e you filed for bankrup dinary course of your b ransfers and transfers m and transfers that you hav ails.	pusiness or financial affairs? nade as security (such as the grantion and as the grantion and the statement. Description and value of property	ng of a security interest or Describe any proper	mortgage on your pro	operty).
ran nclu Do u	nin 2 years before asferred in the ore ude both outright to not include gifts an No Yes. Fill in the deta Person Who Received	e you filed for bankrup dinary course of your b ransfers and transfers m d transfers that you hav ails.	pusiness or financial affairs? nade as security (such as the grantion and as the grantion and the statement. Description and value of property	ng of a security interest or Describe any proper	mortgage on your pro	operty).
ran nclu Do u	nin 2 years before asferred in the ore ude both outright tr not include gifts an No Yes. Fill in the deta Person Who Received Number Street City Person's relationsh	e you filed for bankrup dinary course of your b ransfers and transfers m nd transfers that you hav ails. Transfer State ZIP Code	pusiness or financial affairs? nade as security (such as the grantion and as the grantion and the statement. Description and value of property	ng of a security interest or Describe any proper	mortgage on your pro	operty).
ran nclu Do u	nin 2 years before served in the ore ude both outright to not include gifts an No Yes. Fill in the deta Person Who Received Number Street	e you filed for bankrup dinary course of your b ransfers and transfers m nd transfers that you hav ails. Transfer State ZIP Code	pusiness or financial affairs? nade as security (such as the grantion and as the grantion and the statement. Description and value of property	ng of a security interest or Describe any proper	mortgage on your pro	operty).
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	Calvin	Joseph	Datrice	Case number (if know	_{n)} 23-30403	
	First Name M	Middle Name Last N	ame			
Nith	in 10 years before	vou filed for bankru	ptcy, did you transfer any propert	v to a self-settled trust	or similar device of w	hich you
			sset-protection devices.)	,		
Z N	No					
	Yes. Fill in the detail	ls.				
			Description and value of the prope	rty transferred		Date transfer was made
				*		
١	Name of trust					
-						
				***************************************		manarant
of Q	Liet Cortain E	Inencial Accounts	s, Instruments, Safe Deposit	Rover and Storess	Ilnite	
						
			cy, were any financial accounts o	r instruments held in y	our name, or for your	benefit,
	sed, sold, moved, d ude checking, sav		or other financial accounts; certi	ficates of deposit: sha	res in banks, credit un	ions.
			atives, associations, and other fir		,	,
Ø 1	No					
U	Yes. Fill in the deta	ails.				
			Last 4 digits of account number	Type of account or	Date account was	Last balance before
				instrument	closed, sold, moved, or transferred	closing or transfer
	Name of Financial Insti	itution	XXXX	☐ Checking		\$
				Savings		
	Number Street					
	Number Street			☐ Money market		
	City Street	State ZIP Code	*	☐ Money market☐ Brokerage		
	-	State ZIP Code		☐ Money market		
	-	State ZIP Code	xxxx-	☐ Money market ☐ Brokerage ☐ Other		\$
			xxxx	Money market Brokerage Other Checking		\$
	City Name of Financial Insti		xxxx	Money market Brokerage Other Checking Savings		\$
	City		xxxx	Money market Brokerage Other Checking Savings Money market		\$
	City Name of Financial Insti		xxxx	Money market Brokerage Other Checking Savings Money market Brokerage		\$
	City Name of Financial Insti Number Street		XXXX	Money market Brokerage Other Checking Savings Money market		\$
804	Name of Financial Insti	State ZIP Code		Money market Brokerage Other Checking Savings Money market Brokerage Other		
	Name of Financial Insti	State ZIP Code	XXXX	Money market Brokerage Other Checking Savings Money market Brokerage Other	oox or other depositor	
seci	Name of Financial Institution Number Street City you now have, or ourities, cash, or ot	State ZIP Code		Money market Brokerage Other Checking Savings Money market Brokerage Other	pox or other depositor	
seci	Name of Financial Institution Number Street City you now have, or ourities, cash, or ot	State ZIP Code did you have within 1 ther valuables?		Money market Brokerage Other Checking Savings Money market Brokerage Other	oox or other depositor	
seci	Name of Financial Insti	State ZIP Code did you have within 1 ther valuables?		Money market Brokerage Other Checking Savings Money market Brokerage Other		y for Do you stil
seci	Name of Financial Insti	State ZIP Code did you have within 1 ther valuables?	year before you filed for bankru	Money market Brokerage Other Checking Savings Money market Brokerage Other		y for
seci	Name of Financial Insti	State ZIP Code did you have within 1 ther valuables?	year before you filed for bankru	Money market Brokerage Other Checking Savings Money market Brokerage Other		y for Do you still have it?
seci	Name of Financial Insti	State ZIP Code did you have within 1 ther valuables?	year before you filed for bankru	Money market Brokerage Other Checking Savings Money market Brokerage Other		y for Do you still have it?
seci	Name of Financial Institution Number Street City you now have, or ourities, cash, or ot No Yes. Fill in the deta	State ZIP Code did you have within 1 ther valuables?	year before you filed for bankrup Who else had access to it?	Money market Brokerage Other Checking Savings Money market Brokerage Other		y for Do you still have it?
seci	Name of Financial Institution Number Street City you now have, or ourities, cash, or ot No Yes. Fill in the deta	State ZIP Code did you have within 1 ther valuables?	year before you filed for bankrup Who else had access to it?	Money market Brokerage Other Checking Savings Money market Brokerage Other		y for Do you still have it?
seci	Name of Financial Institution Number Street City you now have, or of urities, cash, or of No Yes. Fill in the deta	State ZIP Code did you have within 1 ther valuables?	year before you filed for bankrup Who else had access to it?	Money market Brokerage Other Checking Savings Money market Brokerage Other		y for Do you still have it?

tor 1	Calvin	Joseph	Datrice	Case number (if known) 23-56465	
101 1	First Name Middle Nam	me Last i	Name		-
Have	you stored property in	a etorago unit	or place other than your home w	within 1 year before you filed for bankruptcy?	
ZÍ N		a storage unit	or place other than your nome w	Within 1 year before you med for buildingtery.	
U	es. Fill in the details.				
			Who else has or had access to it	? Describe the contents	Do you still have it?
					nave it?
					□ No
	Name of Storage Facility		Name		Yes
	Name of Storage Facility		Tallo	· · · · · · · · · · · · · · · · · · ·	La res
					nan-rando
	Number Street		Number Street		0,000
		(4)	City State ZIP Code		
	Olf. Sta	ate ZIP Code			
	City Sta	te ZIP Code			
-					
art 9	Identify Proper	ty You Hold	or Control for Someone Else	•	
	111	4 11 4		beween discussions for	
			omeone else owns? include any	y property you borrowed from, are storing for,	
	hold in trust for someon	e.			
\Box				8	
	Yes. Fill in the details.				
			Where is the property?	Describe the property	Value
			and the second s		
	Owner's Name				\$
				8	and
	Number Street		Number Street		
	Number Street		Number Street		
	Number Street		Number Street		
			Number Street City State	ZIP Code	
		ate ZIP Code		ZIP Code	
art '	City Sta		City State	ZIP Code	
'art '	City Sta			ZIP Code	
-0.0	City Sta	bout Environ	City State	ZIP Code	
or th	City State City State City City City City City City City City	bout Environs	City State mental Information nitions apply:		of
or th	City State City State City City State City City City City City City City City	bout Environment of following defi	City State mental Information nitions apply: te, or local statute or regulation	n concerning pollution, contamination, releases	of
or th <i>En</i> ha:	Give Details All e purpose of Part 10, the vironmental law means a zardous or toxic substar	e following defi any federal, stances, wastes, o	City State mental Information nitions apply: te, or local statute or regulation or material into the air, land, soil	n concerning pollution, contamination, releases l, surface water, groundwater, or other medium,	of
or th En haz	Give Details All e purpose of Part 10, the vironmental law means a zardous or toxic substar	e following defi any federal, stances, wastes, o ations controlli	City State mental Information nitions apply: te, or local statute or regulation or material into the air, land, soil ng the cleanup of these substan	n concerning pollution, contamination, releases l, surface water, groundwater, or other medium, nces, wastes, or material.	*
or the	Give Details All e purpose of Part 10, the vironmental law means a zardous or toxic substar cluding statutes or regula e means any location, fa	e following defi any federal, stances, wastes, o ations controlli acility, or prope	mental Information nitions apply: te, or local statute or regulation or material into the air, land, soil, ng the cleanup of these substan	n concerning pollution, contamination, releases l, surface water, groundwater, or other medium,	*
or the	Give Details All e purpose of Part 10, the vironmental law means a zardous or toxic substar cluding statutes or regula e means any location, fa	e following defi any federal, stances, wastes, o ations controlli acility, or prope	City State mental Information nitions apply: te, or local statute or regulation or material into the air, land, soil ng the cleanup of these substan	n concerning pollution, contamination, releases l, surface water, groundwater, or other medium, nces, wastes, or material.	*
or th En haz inc Sit uti	Give Details All e purpose of Part 10, the vironmental law means a zardous or toxic substar cluding statutes or regula e means any location, fa lize it or used to own, op	e following defi any federal, stances, wastes, o ations controlli acility, or prope perate, or utilize	mental Information nitions apply: te, or local statute or regulation or material into the air, land, soil ng the cleanup of these substan rty as defined under any environ e it, including disposal sites.	n concerning pollution, contamination, releases l, surface water, groundwater, or other medium, nces, wastes, or material. nmental law, whether you now own, operate, or	*
or the	Give Details All e purpose of Part 10, the vironmental law means a zardous or toxic substar cluding statutes or regula e means any location, fa lize it or used to own, op zardous material means	e following defi any federal, stances, wastes, o ations controlli acility, or prope perate, or utilize	mental Information nitions apply: te, or local statute or regulation or material into the air, land, soiling the cleanup of these substantly as defined under any environe it, including disposal sites.	n concerning pollution, contamination, releases l, surface water, groundwater, or other medium, nces, wastes, or material.	*
or the	Give Details All e purpose of Part 10, the vironmental law means a zardous or toxic substar cluding statutes or regula e means any location, fa lize it or used to own, op zardous material means	e following defi any federal, stances, wastes, o ations controlli acility, or prope perate, or utilize	mental Information nitions apply: te, or local statute or regulation or material into the air, land, soil ng the cleanup of these substan rty as defined under any environ e it, including disposal sites.	n concerning pollution, contamination, releases l, surface water, groundwater, or other medium, nces, wastes, or material. nmental law, whether you now own, operate, or	*
or the En haz income Site utili Haz	Give Details All e purpose of Part 10, the vironmental law means a zardous or toxic substar cluding statutes or regula e means any location, fa lize it or used to own, op zardous material means betance, hazardous material	e following defi any federal, stances, wastes, o ations controlli acility, or prope perate, or utilize anything an er	mental Information nitions apply: te, or local statute or regulation or material into the air, land, soiling the cleanup of these substantly as defined under any environe it, including disposal sites.	n concerning pollution, contamination, releases l, surface water, groundwater, or other medium, nces, wastes, or material. nmental law, whether you now own, operate, or azardous waste, hazardous substance, toxic	*
or the En haz income Site utili Haz	Give Details All e purpose of Part 10, the vironmental law means a zardous or toxic substar cluding statutes or regula e means any location, fa lize it or used to own, op zardous material means betance, hazardous material	e following defi any federal, stances, wastes, o ations controlli acility, or prope perate, or utilize anything an er	mental Information nitions apply: Ite, or local statute or regulation or material into the air, land, soil, ing the cleanup of these substair rty as defined under any environ e it, including disposal sites. Invironmental law defines as a had contaminant, or similar term.	n concerning pollution, contamination, releases l, surface water, groundwater, or other medium, nces, wastes, or material. nmental law, whether you now own, operate, or azardous waste, hazardous substance, toxic	*
or the haze income Site utility Ha. Sul	e purpose of Part 10, the vironmental law means a zardous or toxic substartuding statutes or regulate means any location, falize it or used to own, op zardous material means betance, hazardous material tall notices, releases, and	e following defi any federal, stances, wastes, o ations controlli acility, or prope perate, or utilized anything an er erial, pollutant,	mental Information nitions apply: Ite, or local statute or regulation or material into the air, land, soil, ing the cleanup of these substair rty as defined under any environ e it, including disposal sites. Invironmental law defines as a ha contaminant, or similar term.	n concerning pollution, contamination, releases l, surface water, groundwater, or other medium, nces, wastes, or material. nmental law, whether you now own, operate, or azardous waste, hazardous substance, toxic	
or the Encharacter income Site utility Has sufficient Report 4. Has	Give Details All e purpose of Part 10, the vironmental law means a zardous or toxic substar cluding statutes or regula e means any location, fa lize it or used to own, op zardous material means betance, hazardous mate it all notices, releases, and is any governmental unit	e following defi any federal, stances, wastes, o ations controlli acility, or prope perate, or utilized anything an er erial, pollutant,	mental Information nitions apply: Ite, or local statute or regulation or material into the air, land, soil, ing the cleanup of these substair rty as defined under any environ e it, including disposal sites. Invironmental law defines as a ha contaminant, or similar term.	n concerning pollution, contamination, releases i, surface water, groundwater, or other medium, nces, wastes, or material. Inmental law, whether you now own, operate, or azardous waste, hazardous substance, toxic less of when they occurred.	
or the Encharacter income Site utility Has sufficient Report 4. Has	Give Details All e purpose of Part 10, the vironmental law means a zardous or toxic substar cluding statutes or regula e means any location, fa lize it or used to own, op zardous material means betance, hazardous mate it all notices, releases, and is any governmental unit	e following defi any federal, stances, wastes, o ations controlli acility, or prope perate, or utilized anything an er erial, pollutant,	mental Information nitions apply: Ite, or local statute or regulation or material into the air, land, soil, ing the cleanup of these substair rty as defined under any environ e it, including disposal sites. Invironmental law defines as a ha contaminant, or similar term.	n concerning pollution, contamination, releases i, surface water, groundwater, or other medium, nces, wastes, or material. Inmental law, whether you now own, operate, or azardous waste, hazardous substance, toxic less of when they occurred.	
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I h an in 18	nave read the answers on this State aswers are true and correct. I under connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 357 Calvin Joseph Datrice Signature of Debtor 1 Date 07/07/2023 Id you attach additional pages to Yes No Yes	rstand that making a false statement, one can result in fines up to \$250,000, or 71. Signature of Debr	concealing property, or obtaining money or property by for imprisonment for up to 20 years, or both. tor 2 Individuals Filing for Bankruptcy (Official Form 107)?	frauc
I hanin 18	ave read the answers on this State iswers are true and correct. I under connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 357 Calvin Joseph Datrice Signature of Debtor 1 Date 07/07/2023 Id you attach additional pages to Yell No Yes Id you pay or agree to pay someone No	rstand that making a false statement, one can result in fines up to \$250,000, or 71. Signature of Debut	concealing property, or obtaining money or property by for imprisonment for up to 20 years, or both. tor 2 Individuals Filing for Bankruptcy (Official Form 107)?	

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Debtor 1	Calvin	Joseph	Datrice
Deptor 1	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court fo	the: Northern District of G	Seorgia

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Part 1: 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ☐ Single-family home Creditors Who Have Claims Secured by Property. 1.1. ☐ Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the portion you own? entire property? Manufactured or mobile home ☐ Land ☐ Investment property Describe the nature of your ownership ☐ Timeshare ZIP Code City interest (such as fee simple, tenancy by ☐ Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Single-family home Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description Condominium or cooperative Current value of the Current value of the ■ Manufactured or mobile home entire property? portion you own? ☐ Land ☐ Investment property Describe the nature of your ownership Timeshare City State ZIP Code interest (such as fee simple, tenancy by ☐ Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Debtor 1 and Debtor 2 only ☐ Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number:

ebtor 1	Calvin First Name Middle	Joseph Name Last Name	Datrice Case	number (if known) 23-56465	
	riist Name Middle	Name Last Name			
1.3.		autoriorina parti estrologico monte estrologico de contra estrolog	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	the amount of any sec	d claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property.
	Street address, if available	s, or other description	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	ne Current value of the portion you own?
	(,	☐ Land ☐ Investment property	\$	\$
	City	State ZIP Code	Timeshare Other	interest (such as f	re of your ownership ee simple, tenancy by life estate), if known.
			Who has an interest in the property? Co ☐ Debtor 1 only	heck one.	
	County		Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is	community property
			At least one of the debtors and another Other information you wish to add abo	•	5)
			property identification number:		*
Add t	he dollar value of the r	portion you own for a	II of your entries from Part 1, including a	any entries for pages	0.0
			here.		\$
	Describe Your		et in any vahicles, whother they are regis	stered or not? Include any vehi	iclas
u own	own, lease, or have leg that someone else drive , vans, trucks, tractors	gal or equitable intere es. If you lease a vehicl	st in any vehicles, whether they are regis le, also report it on Schedule G: Executory (
o you o ou own Cars	own, lease, or have leg that someone else drive , vans, trucks, tractors	gal or equitable intere es. If you lease a vehicl	le, also report it on Schedule G: Executory (Contracts and Unexpired Lease Check one. Do not deduct secure.	s. d claims or exemptions. Put
Cars	own, lease, or have leg that someone else drive , vans, trucks, tractors	gal or equitable interees. If you lease a vehicles, sport utility vehicles infiniti	le, also report it on <i>Schedule G: Executory C</i> s, motorcycles Who has an interest in the property? C Debtor 1 only	Check one. Do not deduct secure the amount of any sec	s. d claims or exemptions. Put cured claims on <i>Schedule D</i> .
Cars	own, lease, or have leg that someone else drive , vans, trucks, tractors lo es	gal or equitable intere es. If you lease a vehicles , sport utility vehicles infiniti	le, also report it on <i>Schedule G: Executory</i> (s, motorcycles Who has an interest in the property? C	Check one. Do not deduct secure the amount of any sec Creditors Who Have of the antire property?	d claims or exemptions. Put cured claims on Schedule D Claims Secured by Property. he Current value of the
Cars	own, lease, or have leg that someone else drive, vans, trucks, tractors lo es Make: Model: Year:	gal or equitable intereres. If you lease a vehicles, sport utility vehicles infiniti Q50 2017	Who has an interest in the property? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Check one. Do not deduct secure the amount of any sec Creditors Who Have C	d claims or exemptions. Put sured claims on Schedule D Claims Secured by Property he Current value of t portion you own?
coyou own Cars, N V 3.1.	own, lease, or have leg that someone else drive , vans, trucks, tractors lo es Make: Model: Year: Approximate mileage: Other information:	infiniti Q50 2017 50,000	Who has an interest in the property? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property	Check one. Do not deduct secure the amount of any sec Creditors Who Have C	d claims or exemptions. Put cured claims on Schedule D Claims Secured by Property he Current value of t portion you own?
coyou own Cars, N V 3.1.	own, lease, or have leg that someone else drive else drive that someone else drive else else drive else else drive else else else else else else else el	infiniti Q50 2017 50,000	Who has an interest in the property? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property	Check one. Do not deduct secure the amount of any sec Creditors Who Have of the entire property? Ty (see \$ 25,641.0000) Check one. Do not deduct secure the amount of any sec Creditors who have of the entire property?	d claims or exemptions. Put cured claims on Schedule D Claims Secured by Property. Current value of the portion you own? 00 \$ 0.0
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Cars, N V Y Y	own, lease, or have leg that someone else driver, vans, trucks, tractors longes Make: Model: Year: Approximate mileage: Other information: Lease I own or have more than Make: Model:	infiniti Q50 2017 50,000	Who has an interest in the property? C Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property instructions) Who has an interest in the property? C Debtor 1 only Debtor 2 only	Check one. Do not deduct secure the amount of any sec Creditors Who Have of the entire property? Current value of the entire property? Suppose the amount of any sec Creditors Who Have of the amount of any sec Creditors Who Have of the entire property?	d claims or exemptions. Put cured claims on Schedule D. Claims Secured by Property. Claims Secured by Property. Current value of the portion you own? OO \$ 0.0

.3. Make:		ne	Last Name			_{nown)} 23-56465	
.3. Make:		entropy and the second of the					
Model:	_			no has an interest in the	ne property? Check one.	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D:
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Year:	-			Debtor 1 and Debtor 2 or	nly	Current value of the entire property?	Current value of the portion you own?
Approx	rimate mileage:			At least one of the debto	rs and another	entire property:	portion you own.
Other in	nformation:					¢	C
				Check if this is comminstructions)	iunity property (see	Ψ	Ψ
.4. Make:	-		_		ne property? Check one.	Do not deduct secured cla	
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Year:				Debtor 2 only		Current value of the	Current value of the
	vimata milagga:			Debtor 1 and Debtor 2 or		entire property?	portion you own?
	kimate mileage:		ч	At least one of the debto	ers and another		•
Other i	nformation:			Check if this is comm	nunity property (see	\$	\$
				instructions)	, p		
<u> </u>							
					ther vehicles, and access		*
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xamples: Bo No Yes			watercraft, fi	shing vessels, snowmol	biles, motorcycle accesso	ories	aime or exemptions. But
ixamples: Bo No Yes I.1. Make:	oats, trailers, moto		watercraft, fis	shing vessels, snowmot		Do not deduct secured clean the amount of any secure	d claims on Schedule D:
xamples: Bo No Yes	oats, trailers, moto		watercraft, fis Wh □	shing vessels, snowmob no has an interest in the Debtor 1 only	biles, motorcycle accesso	ories Do not deduct secured cla	d claims on Schedule D:
ixamples: Bo No Yes I.1. Make:	oats, trailers, moto		watercraft, fis Wr	no has an interest in the Debtor 1 only Debtor 2 only	biles, motorcycle accesson	Do not deduct secured claused the amount of any secure Creditors Who Have Claim	d claims on Schedule D: ms Secured by Property.
Xamples: Bo No Yes 4.1. Make: Model: Year:	oats, trailers, moto		watercraft, fis	shing vessels, snowmob no has an interest in the Debtor 1 only	ne property? Check one.	Do not deduct secured clean the amount of any secure	d claims on Schedule D:
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No Yes 1.1. Make: Model: Year: Other i	oats, trailers, moto	rs, personal	watercraft, fis	no has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is commended.	ne property? Check one. nly ors and another	Do not deduct secured clause the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ms Secured by Property. Current value of the
Xamples: Bo No Yes 4.1. Make: Model: Year: Other i	information:	rs, personal	watercraft, fis	no has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is commitment instructions)	ne property? Check one. Inly ors and another nunity property (see	Do not deduct secured classes the amount of any secure Creditors Who Have Claim Current value of the entire property?	d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
No Yes 1.1. Make: Model: Year: Other i	information:	ne, list here:	watercraft, fis	no has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is comminstructions)	ne property? Check one. nly ors and another	Do not deduct secured clithe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured clithe amount of any secure	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$
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Axamples: Book No Yes 1.1. Make: Model: Year: Other in Make: Model: Year: Model: Year: Model: Year: Model: Year:	information:	ne, list here:	watercraft, fis	no has an interest in the Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this is comminstructions)	ne property? Check one. Inly ors and another Inunity property (see	Do not deduct secured classes the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ Do not deduct secured classes the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$

Debtor 1

Calvin First Name Joseph

Middle Nam

Datrice

Case number (if known) 23-56465

Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ Yes. Describe..... 0.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games No No ☐ Yes. Describe..... 0.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☑ No ☐ Yes. Describe...... 0.00 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments Yes. Describe...... 0.00 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe...... 0.00 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☑ No 0.00 ☐ Yes. Describe...... 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No No 0.00 ☐ Yes. Describe...... 13. Non-farm animals Examples: Dogs, cats, birds, horses 0.00 Yes. Describe...... 14. Any other personal and household items you did not already list, including any health aids you did not list ✓ No ☐ Yes. Give specific 0.00 information. 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached 0.00 for Part 3. Write that number here

Debtor 1

Calvin First Name Joseph

Datrice

Part 4: Describe You	ır Financial Assets		1	
Do you own or have any I	egal or equitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims
				or exemptions.
16. Cash Examples: Money you h	nave in your wallet, in your hor	ne, in a safe deposit box, and on hand whe	en you file your petition	
☑ No				0.00
☐ Yes			Cash:	\$
		unts; certificates of deposit; shares in credi nultiple accounts with the same institution,		*
☑ No				
☐ Yes		Institution name:		
	17.1. Checking account:			\$
	17.2. Checking account:			\$
	17.3. Savings account:			\$
	17.4. Savings account:			\$
	17.5. Certificates of deposit:			
				\$
	17.6. Other financial account:			\$
	17.7. Other financial account:			\$
	17.8. Other financial account:			\$
	17.9. Other financial account:			\$
		*		
18. Bonds, mutual funds,	or publicly traded stocks			
	investment accounts with brok	kerage firms, money market accounts		
☑ No				.4
☐ Yes	Institution or issuer name:			
				\$
				. \$
				\$
		* .		
		orated and unincorporated businesses,	including an interest in	
an LLC, partnership, a	-			
☑ No	Name of entity:		% of ownership:	
Yes. Give specific information about			0%%	\$
them			0%%	\$
	A		%	\$

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Case number (if known) 23-56465 **Datrice** Calvin Joseph Debtor 1 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. V No ☐ Yes. Give specific Issuer name: information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans V No ☐ Yes. List each Institution name: account separately. Type of account: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☑ No ☐ Yes..... Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) V No Yes..... Issuer name and description:

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Case number (if known) 23-56465 **Datrice** Joseph Debtor 1 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). V No 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit V No ☐ Yes. Give specific information about them.... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No No ☐ Yes. Give specific information about them.... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No No ☐ Yes. Give specific information about them.... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you V No ☐ Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else V No Yes. Give specific information.....

Datrice

Joseph

Calvin

Debtor 1

Case number (if known) 23-56465

31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No No ☐ Yes. Name the insurance company Surrender or refund value: Company name: Beneficiary: of each policy and list its value. ... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☑ No ☐ Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No No ☐ Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim. 35. Any financial assets you did not already list No. ☐ Yes. Give specific information...... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached 0.00 for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned ☐ No Yes, Describe.... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, moderns, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ☐ No ☐ Yes. Describe....

Debtor 1	Calvin	Joseph	Datrice	Case number (if known) 23-56465	
	First Name	Middle Name Last Name			
40. Machin	ery, fixtures, e	quipment, supplies you use in	business, and tools of	your trade	
☐ No	••		•		
	- · ·				·····
☐ Yes	s. Describe				\$
44 Inventor					
41. Invento				*	
	s. Describe				
— 16:	s. Describe				a
42. Interes	ts in partnersh	ips or joint ventures			
☐ No					
		Name of entity:		% of ownership:	
				%	\$
				%	\$
				%	\$
43. Custor	ner lists, mailin	ng lists, or other compilations			x
☐ No					
☐ Ye	s. Do your lists	include personally identifiable	information (as defined	I in 11 U.S.C. § 101(41A))?	
	☐ No				
	Yes. Desc	cribe			Annua Caracteria Carac
					\$
			3		
		property you did not already li	st		
☐ No					
	s. Give specific				\$
info	ormation				
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					\$
		of all of your entries from Part			\$
TOT Pa	rt 5. write that	number nere		→	
			Compression of the state of the	Изганалия барини шин (10 км настраналична интернации интернации интернации интернации интернации и см	
					*
Part 6:	Describe A	ny Farm- and Commercial	Fishing-Related Prop	erty You Own or Have an Interest I	n.
	If you own o	r have an interest in farmland,	list it in Part 1.		
and the second s					
		any legal or equitable interest i	n any farm- or commer	cial fishing-related property?	
☑ No	. Go to Part 7.				
☐ Ye	s. Go to line 47.			* *	
					Current value of the
and a second a second and a second a second and a second					portion you own? .
EQUIPMENT TO HERE					Do not deduct secured claims
47 Ec	animale				or exemptions.
47. Farm		noultry farm raised fish			
		poultry, farm-raised fish			
☐ No					***************************************
☐ Ye	S		***************************************		
is a construction of the c					•
					Ψ

Debtor 1	Calvin First Name	Joseph Middle Name Last Name	Datrice	Ca	ase number (if known) 23-56465	· · · · · · · · · · · · · · · · · · ·
	riist Name	Middle Name Last Name		140		
	either growing	or harvested				Anterior securitoris
☐ No	s. Give specific				The state of the s	Paramotic
info	rmation			***************************************		\$
	nd fishing equi	pment, implements, machinery	, fixtures, and tools	of trade		papay in the supplier of the s
☐ No☐ Yes	3					To a contract of the contract
	отпольно			-		\$
	nd fishing sup	olies, chemicals, and feed				
☐ No	S					***
_ 100						\$
51. Any far	m- and comme	rcial fishing-related property y	ou did not already li	ist		ul de la constant de
☐ No	s. Give specific					To an analysis of the state of
	ormation				NAMES AND A STATE OF THE STATE	\$
		of all of your entries from Part 6				\$
for Par	t 6. Write that r	number here				
	l 					
Part 7:	Describe A	All Property You Own or	Have an Intere	st in That	ou Did Not List Above	
		operty of any kind you did not a country club membership	already list?			
☑ No						•
	s. Give specific ormation					\$
						\$
54. Add th	e dollar value d	f all of your entries from Part 7	. Write that number	nere	7	Φ
Part 8:	List the T	otals of Each Part of this	- Form			
rait 0.	List the I	otals of Lacii Fart of this	5 roilli			0.00
55. Part 1:	Total real esta	te, line 2	· · · · · · · · · · · · · · · · · · ·		→	\$
56. Part 2:	Total vehicles,	line 5	\$	0.00		
57. Part 3:	Total personal	and household items, line 15	s \$	0.00		
58. Part 4:	Total financial	assets, line 36	\$	0.00		
59. Part 5:	Total business	-related property, line 45	\$	0.00		
		d fishing-related property, line	52 \$	0.00		
		operty not listed, line 54	+\$	0.00		
				0.00		. 0.00
62. Total p	ersonal proper	ty. Add lines 56 through 61	\$	0.00	Copy personal property total ->	+ \$0.00
			00			¢ 0.00
63. Total o	of all property o	n Schedule A/B. Add line 55 + li	ne 62			\$

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		, ,		
Debtor 1	Calvin	Joseph	Datrice	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for t	he:Northern District of Ge	orgia	
Case number	23-56465			
(If known)				

Official Form 106C

Fill in this information to identify your case

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

	Which set of exemptions are you claiming? ☐ You are claiming state and federal nonbank ☑ You are claiming federal exemptions. 11 U	cruptcy exemptions. 11 .S.C. § 522(b)(2)	U.S.C. § 522(b)(3)	e P
2.	For any property you list on Schedule A/B th	nat you claim as exem	ot, fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description: Line from Schedule A/B:	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	* .
	Brief description: Line from Schedule A/B:	\$	□ \$ □ 100% of fair market value, up to any applicable statutory limit	
	Brief description: Line from Schedule A/B:	\$	\$ \$ 00% of fair market value, up to any applicable statutory limit	71
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/25 and every 3 ✓ No ✓ Yes. Did you acquire the property covered	years after that for case	s filed on or after the date of adjustment.)	
	No Yes	by the exemption within	1,210 days before you filed this case?	

Debtor 1

Calvin Joseph Datrice

		_
art 2:	Additional	Page

Additional Page	i		
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	- \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	en an annual en andre instruction de an instruction of Addresses in terms of
Brief description:	. \$	\$ 100% of fair market value, up to	
Line from Schedule A/B: ———	*	any applicable statutory limit	
Brief description:	. \$	\$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	. \$		
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	. \$		
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	. \$	<u> </u>	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	. \$	_ 🗆 \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	. \$		
Line from Schedule A/B: ———		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	. \$	_ 🗆 \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	

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Fill in this i	nformation to identi	fy your case:					
Debtor 1	Calvin	Josep	h Dat	trice			
	First Name	Middle Nam	ne Last	Name			
Debtor 2 (Spouse, if filing	j) First Name	Middle Nan	ne Last	Name			
United States	Bankruptcy Court for th	e: Northern Di	strict of Georgia				
Case number	23-56465		-	_		Observation 1	:
(If known)						☐ Check amende	
0 (5)	- 4005						
	Form 106D						
Sche	dule D: Cre	editors	Who Hav	e Claims Secu	red by Pro	perty	12/15
Be as comp	plete and accurate a	s possible. If	two married peopl	e are filing together, both are	e equally responsible f	or supplying correct	t
	pages, write your na				56, una unaon ni to uno	топпа сп ппа тор от	,
1. Do any c	reditors have claim	s secured by	your property?				
☐ No. C	check this box and su	bmit this form		ur other schedules. You have n	othing else to report on	this form.	
☑ Yes.	Fill in all of the inform	ation below.					
Part 1:	ist All Secured C	laims					
					Column A	Column B	Column C
				I claim, list the creditor separate list the other creditors in Part 2		Value of collateral that supports this	Unsecured portion
				ing to the creditor's name.	value of collateral.	claim	If any
2.1 Family	First Credit Unio	n	Describe the proper	rty that secures the claim:	\$25,641.00	\$14,217.00	\$ 11,424.00
Creditor's N			2017 Black Infin	iti Q50			
Number	Street Street						
			_	ile, the claim is: Check all that a	pply.		
Hapev	ille Ga	30354	☐ Unliquidated				
City	State	ZIP Code	☐ Disputed				
_	the debt? Check one.		Nature of lien. Chec				
Debtor			An agreement you car loan)	ı made (such as mortgage or secur	red		
	1 and Debtor 2 only			ch as tax lien, mechanic's lien)			
At least	t one of the debtors and	another	☐ Judgment lien from ☐ Other (including a				
	if this claim relates t	оа	Unter (including a	right to oliset)			
comm Date debt	unity debt was incurred <u>12/01</u>	1/2021	Last 4 digits of acc	ount number 7 5 5 0	-		
2.2		***************************************	1 000 1104041040000000000000000000000000	rty that secures the claim:	\$	\$	\$
Creditor's I	Name				AND		
Number	Street						
				file, the claim is: Check all that a	pply.		
			☐ Contingent☐ Unliquidated☐				
City	State	ZIP Code	☐ Disputed				
_	the debt? Check one.		Nature of lien. Chec				
☐ Debtor☐ Debtor☐			An agreement you car loan)	u made (such as mortgage or secu	red		
	1 and Debtor 2 only		☐ Statutory lien (suc	ch as tax lien, mechanic's lien)			
☐ At leas	t one of the debtors and	another	☐ Judgment lien from	m a lawsuit			

25,641.00

Other (including a right to offset)

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

Date debt was incurred

☐ Check if this claim relates to a community debt

Debtor 1 Calvin Jose First Name Middle Name	cph Datrice Case num	nber (<i>if known</i>) 23-564	65	
Part 1: After listing any entries on this post by 2.4, and so forth.	page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name Number Street				
City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one. Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)			
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	_ ,		
☐ Check if this claim relates to a community debt Date debt was incurred	Last 4 digits of account number			
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name Number Street	-			
City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed			
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
☐ Check if this claim relates to a community debt				
Date debt was incurred	Last 4 digits of account number			
Creditor's Name Number Street	Describe the property that secures the claim:	\$	\$	\$
City State ZIP Code	- As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed			
Who owes the debt? Check one. Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)			
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	-		
community debt Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entrie	es in Column A on this page. Write that number here:	\$		

Document

Page 27 of 57 Case number (if known) 23-56465 Joseph Datrice Calvin Debtor 1 List Others to Be Notified for a Debt That You Already Listed Part 2: Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if

be	notified for	r any debts in Part 1	, do not fill out or submit	this page.	st the additional creditors here. If you do not have additional persons to
				i.	On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
	-				-
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street		64	-
	-				-
	City		State	ZIP Code	-
				***************************************	On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			
	City		State	ZIP Code	-
					On which line in Part 1 did you enter the creditor?
	Name			-	Last 4 digits of account number 7 5 5 0
	Number	Street			_ *
	Number	Street			
					-
	City		State	ZIP Code	-
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Chroat			-
	Number	Street			
					=
	City		State	ZIP Code	
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
					7
	City		State	ZIP Code	

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	formation to ide	entify your cas	e:			
Debtor 1	Calvin J	oseph Middle N	Datrice	Last Name		
Debtor 2 (Spouse, if filing)		Middle N		Last Name		
	Bankruptcy Court fo				-	
Case number	23-56465			3		☐ Check if thi amended fi

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Pa	rt 1: List All of Your PRIORITY Unsecure	ed Claims			
2.	each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the control of the con	editor has more than one priority unsecured claim, list the a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's national Part 1. If more than one creditor holds a particular claim	at claim here ar ame. If you hav	nd show both to more than to	priority and wo priority
		······································	Total claim	Priority amount	Nonpriority amount
2.1	Priority Creditor's Name Number Street	Last 4 digits of account number	\$	\$	\$
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify			
2.2	Yes	Last 4 digits of account number	\$	s	\$
	Priority Creditor's Name Number Street	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent		.	 •
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify			

Debtor 1

Calvin First Name Joseph Middle Name

Datrice Last Name

listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpri amoun
	Last 4 digits of account number	\$	\$. \$
Priority Creditor's Name	Last 4 digits of account number	,		- '
	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
21.2	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
	Type of PRIORITY unsecured claim:			
Debtor 1 only	Type of PRIORITY unsecured claim.			
Debtor 2 only	□ Domestic support obligations			
Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
•	Other. Specify			
Is the claim subject to offset?				
□ No				
Yes				
			TT. W. C. T. T. S. C. T.	***************************************
	Last 4 digits of account number	\$	\$	_ \$
Priority Creditor's Name				
Newbox	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
on,	☐ Disputed			
Who incurred the debt? Check one.	_ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
	Other. Specify			
Is the claim subject to offset?				
☐ No				
Yes		Name and the second sec	***************************************	***************************************
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	Last 7 digits of account number		_	-
	When was the debt incurred?			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
	Tune of PRIORITY			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
At least one of the debtors and another	☐ Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			***************************************
- Check it this claim is for a community debt	Other. Specify			
Is the claim subject to offset?				
□ No				
☐ Yes				

Debtor 1

Calvin First Name Joseph

seph Datri

Datrice

Pa	rt 2: List All of Your NONPRIORITY	/ Unsec	ured Claims					
	Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. ☐ Yes							
	List all of your nonpriority unsecured clai nonpriority unsecured claim, list the creditor included in Part 1. If more than one creditor claims fill out the Continuation Page of Part	separate holds a p	ly for each claim.	For each claim listed, identify wha	at type of claim it is. Do not	ist claims a	already	
						Total clai	m	
1.1	Capital One			Last 4 digits of account number		\$	737.00	
	PO Box 31293			When was the debt incurred?	08/12/2022			
	Number Street Salt Lake City UT	-	84131	,	- 02/10/2023			
	City State	e Z	IP Code	As of the date you file, the claim	is: Check all that apply.			
	Who incurred the debt? Check one. ✓ Debtor 1 only			☐ Contingent ☐ Unliquidated ☐ Disputed				
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:			
	At least one of the debtors and another			Student loans	irou olaiiii.			
	☐ Check if this claim is for a community	debt		Obligations arising out of a separ that you did not report as priority	ration agreement or divorce claims			
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts				
	☑ No ☐ Yes			Other. Specify Credit Card	debt			
	u res					energy and the second s		
4.2	Capital One Nonpriority Creditor's Name			Last 4 digits of account number When was the debt incurred?	7 4 6 6 05/14/2022	\$1	,543.00	
	PO Box 31293				- 02/10/2023			
	Number Street Salt Lake City U7	Г	84131	As of the date you file, the claim				
	City Stat	e Z	ZIP Code	☐ Contingent				
	Who incurred the debt? Check one.			Unliquidated				
	Debtor 1 only			Disputed				
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	ıred claim:			
	At least one of the debtors and another			☐ Student loans				
	☐ Check if this claim is for a community	debt		Obligations arising out of a separathat you did not report as priority	claims			
	Is the claim subject to offset?			Debts to pension or profit-sharing Other. Specify Credit Card	g plans, and other similar debts			
	Ø No □ Yes			Other, Specify Oredit Card	debt			
4.3	Access To Capital Entrepeneurs	000000 0000000000000000000000000000000	***************************************	Last 4 digits of account number	2 7 9 4			
	Nonpriority Creditor's Name			When was the debt incurred?	10/04/2022	\$12	1,477.00	
	3173 Highway 129N Number Street			When was the dest mountain				
	Cleveland G.		30528 ZIP Code	As of the date you file, the claim	is: Check all that apply.			
			Lii Oode	☐ Contingent				
	Who incurred the debt? Check one.			☐ Unliquidated				
	Debtor 1 only Debtor 2 only			☐ Disputed				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	ıred claim:			
	At least one of the debtors and another			Student loans	area ciami.			
	☐ Check if this claim is for a community	debt		Obligations arising out of a sepa	ration agreement or divorce			
	Is the claim subject to offset?			that you did not report as priority	claims			
	₩ No Yes			Debts to pension or profit-sharin Other. Specify Business Lo				
	☐ 162							

Debtor 1

Calvin First Name

Joseph Middle Name

eph Datrice

imone

ter listing any entries on this page, num	ber them	beginning with 4	4.4, followed by 4.5, and so forth.	Total claim
Family First Credit Union		1	Last 4 digits of account number 7 8 7 0	\$517.00
Nonpriority Creditor's Name 3604 Atlanta Ave Suite 16			When was the debt incurred? 12/01/2021	
Number Street Hapeville	Ga	30354	As of the date you file, the claim is: Check all that apply.	
	State	ZIP Code	☐ Contingent☐ Unliquidated	
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another			☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a communi Is the claim subject to offset? ☑ No ☐ Yes	ity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Auto Loan	
Lending Point LLC	*		Last 4 digits of account number 9 1 1 9	_{\$_} 14,682.0
Nonpriority Creditor's Name 1201 Roberts Blvd NW STE		ÿ	When was the debt incurred? 06/08/2022	
Number Street Kennesaw	Ga	30144	As of the date you file, the claim is: Check all that apply.	(4)
Who incurred the debt? Check one.	State	ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed☐	,
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a communities the claim subject to offset?	ity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Personal Loan	
☑ No □ Yes				
One Main Financial			Last 4 digits of account number 4 7 0 6	\$_5,673.0
Nonpriority Creditor's Name 100 International Drive 15th Flo	oor		When was the debt incurred? $06/01/2021$	
Number Street Baltimore	MD	21202	As of the date you file, the claim is: Check all that apply.	
City Who incurred the debt? Check one.	State	ZIP Code	☐ Contingent☐ Unliquidated☐ Disputed☐	
☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a commun Is the claim subject to offset? ☑ No ☐ Yes	nity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Personal Loan	

Debtor 1

Calvin

Joseph

Datrice

Case number (if known) 23-56465

Part 3: List Others to Be Notified About a Debt That You Already Listed

xample, i	if a collection agent the collection age	ncy is trying to colle ency here. Similarly,	ct from you if you have	our bankruptcy, for a debt that you already listed in Parts 1 or 2. For for a debt you owe to someone else, list the original creditor in Parts 1 or more than one creditor for any of the debts that you listed in Parts 1 or 2, list the stobe notified for any debts in Parts 1 or 2, do not fill out or submit this page.
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name	~			Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claim
			-	
				Last 4 digits of account number
City		State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Vame				
li saska a	Chroni			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		ij	Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
99-300-100-000-000-00-00-00-00-00-00-00-00-0				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
			-	Claims
City		State	ZIP Code	Last 4 digits of account number
				On which entry in Part 1 or Part 2 did you list the original creditor?
Vame				Line of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
				Claims
Olt.		04-4-	ZIP Code	Last 4 digits of account number
City		State	ZIP CODE	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			•	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
			-	Claims
City		State	ZIP Code	Last 4 digits of account number
City		Sidle	LIF COUR	On which entry in Part 1 or Part 2 did you list the original creditor?
Name				
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
City		otate	ZIP Code	

Debtor 1

Calvin First Name Joseph

Datrice

Case number (if known) 23-56465

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$
The second secon	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
THE REAL PROPERTY OF THE PROPE	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$0.00
VANADATATATATATATATATATATATATATATATATATAT	6e. Total. Add lines 6a through 6d.	6e.	\$0.00
THE REPORT OF THE PARTY OF THE		ŧ	Total claim
Total claims	6f. Student loans	6f.	\$
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
***************************************	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$37,629.00
	6j. Total. Add lines 6f through 6i.	6j.	\$37,629.00

Fill in this information to identify your ca	ase:		
Dahler Calvin			
Deplot	le Name Last Name		
Debtor 2 (Spouse If filing) First Name Middl	le Name Last Name	—	
United States Bankruptcy Court for the:	District of		
22 56465	Diotriot of	1	
Case number (If known)			Check if this is an amended filing
Official Form 106G			
Schedule G: Executo	ry Contracts and	Unexpired Leases	12/15
information. If more space is needed, cop additional pages, write your name and car. 1. Do you have any executory contracts. No. Check this box and file this form	by the additional page, fill it out, not see number (if known). s or unexpired leases? In with the court with your other schee	ogether, both are equally responsible for supplying umber the entries, and attach it to this page. On the dules. You have nothing else to report on this form. e listed on Schedule A/B: Property (Official Form 106A)	e top of any
		ract or lease. Then state what each contract or leas m in the instruction booklet for more examples of exect	
Person or company with whom you l	have the contract or lease	State what the contract or lease is for	
			**
The Retreat at Edgewood		_ Apartment Rental	
Name 150 Hutchinson St Ne			
Number Street		-	
Atlanta Ga City State	30307 ZIP Code		
	ZIF Code		
2.2 Family First Credit Union		Vehicle Lease	
Name 3604 Atlanta Ave Suite 16			
Number Street		_	
Hapeville Ga City State	30354 ZIP Code	_	
2.3	ZII COGG		
Name		-	
The state of the s		_	
Number Street			
City State	ZIP Code	-	
2.4			
Name		_	
Andrews		_	
Number Street			
City State	ZIP Code		
2.5			
Name			
Number Street		- '	
Trained Street			
City State	ZIP Code	-	

ebto		alvin			Case number (if known) 23-56465
		First Name	Middle Name	Last Name	
	A	dditional	Page if You Ha	ve More Contracts or Lease	s
	Person o	or company	with whom you	have the contract or lease	What the contract or lease is for
2					
	Name			1	
	Number	Street			
	City		State	ZIP Code	
-	wcasquoogrongpas.orS.casqriitto	000000000000000000000000000000000000000		*	Handa and residentic description of the Control of
	Name				_
	Number	Street			
	City		State	ZIP Code	_
]	Name				_
	Number	Street			- ,
	City		State	ZIP Code	<u> </u>
-					
	Name				
	Number	Street			
		Olicci		710.0	<u> </u>
T	City		State	ZIP Code	
	Nama				<u> </u>
	Name				
	Number	Street			
	City		State	ZIP Code	
	Name				4
	Number	Street			
	City	,	State	ZIP Code	_
_	neetopolinis neetota tatal satisto tira				
	Name				
	Number	Street			
	City		State	ZIP Code	

	Name				_
	Number	Street			y v
	City		State	ZIP Code	
	CITY		State	AIT COUR	

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Fill in this information to identify your case:						
Debtor 1	Calvin	Joseph	Datrice			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing) First Name	Middle Name	Last Name			
United States	a					
Case number	23-56465		-			
(If known)		FI.				

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

	umber the entries in the boxes on the left. Attach the Additional Page to this par number (if known). Answer every question.	ge. On the top of any Additional Pages, write your name and
E	o you have any codebtors? (If you are filing a joint case, do not list either spouse a ☑ No ☑ Yes	s a codebtor.)
2. V	Within the last 8 years, have you lived in a community property state or territory	
	Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Wasl	hington, and Wisconsin.)
	☑ No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?	5
,		*
	☐ No☐ Yes. In which community state or territory did you live?	Fill in the name and current address of that person
	Tes. III Willest community state of territory and you live:	. This in the name and canonicadaress of that person.
	Name of your spouse, former spouse, or legal equivalent	
	Number Street	
	Number Street	
	City State ZIP Code	•
2 1	n Column 1, list all of your codebtors. Do not include your spouse as a codebto	r if your engues is filing with you. List the person
	shown in line 2 again as a codebtor only if that person is a guarantor or cosigne	
	Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedu	ule G (Official Form 106G). Use Schedule D,
	Schedule E/F, or Schedule G to fill out Column 2.	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
		Check all schedules that apply:
3.1		Cricia di scricdales trat appry.
3.1	Name	Schedule D, line
our and the same of the same o	Name	☐ Schedule E/F, line
	Number Street	☐ Schedule G, line
	City State ZIP Code	
3.2	Oily State Zil Good	
5.2	Name	Schedule D, line
	Name	☐ Schedule E/F, line
	Number Street	☐ Schedule G, line
	City State ZIP Code	9
3.3	Oily Gate Lin Gode	
0.0	Name	Schedule D, line
	, many	☐ Schedule E/F, line
	Number Street	☐ Schedule G, line
	City State ZIP Code	¥
	July July July July July July July July	

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Page 37 of 57 Case number (if known) 23-56465 Joseph Datrice Calvin Debtor 1 **Additional Page to List More Codebtors** Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3._ ☐ Schedule D, line _____ Name ☐ Schedule E/F, line _____ ☐ Schedule G, line ____ Number Street City State ZIP Code ☐ Schedule D, line _____ Name ☐ Schedule E/F, line ____ ☐ Schedule G, line _____ Number Street City State ZIP Code ☐ Schedule D, line Name ☐ Schedule E/F, line ___ ☐ Schedule G, line ____ Number Street ZIP Code City State ☐ Schedule D, line _____ Name ☐ Schedule E/F, line ____ ☐ Schedule G, line ____ Number Street State ZIP Code City ☐ Schedule D, line ____ Name ☐ Schedule E/F, line ____ ☐ Schedule G, line _____ Number Street ZIP Code City State ☐ Schedule D, line ___ Name ☐ Schedule E/F, line ____ ☐ Schedule G, line Number Street City State ☐ Schedule D, line ___ Name ☐ Schedule E/F, line ____ ☐ Schedule G, line _____ Number Street City

ZIP Code State ☐ Schedule D, line ___ ☐ Schedule E/F, line ___ ☐ Schedule G, line _____ ZIP Code State Schedule H: Your Codebtors page ___ of ___

City

Name

Number

Street

3._

II in this information to identify	your case:				
hter 1 Calvin	Joseph	Datrice			
btor 1 First Name	Middle Name	Last Name			
btor 2 ouse, if filing) First Name	Middle Name	Last Name			
ited States Bankruptcy Court for the:	Northern District of Georgia				
22 56465	Northern District of Scorgic	-			
se number 23-30403 known)			Check if		
				mended filing pplement showing postp	etition chanter
				me as of the following da	
ficial Form 106l			MM /	DD / YYYY	
chedule I: You	ır Income				12/15
as complete and accurate as population. If you are separated and your spot arate sheet to this form. On the art 1: Describe Employment	ou are married and not fil use is not filing with you, e top of any additional pa	ling jointly, and you do not include info	ir spouse is living with rmation about your sp	n you, include information oouse. If more space is no	n about your spo eeded, attach a
Fill in your employment information.	2	Debtor 1		Debtor 2 or non-fil	ing spouse
If you have more than one job,		(10000000000000000000000000000000000000			
attach a separate page with information about additional	Employment status	☐ Employed		☐ Employed	
employers.		✓ Not employed	d .	□ Not employed	
Include part-time, seasonal, or self-employed work.					
Occupation may include student	Occupation	Self Employed	1		
or homemaker, if it applies.			¥		
	Employer's name	Datrice Inc		_	
	Employer's address	150 Hutchinso	on St No		
	Employer's address	Number Street	in Strie	Number Street	
		Unit 711		_	
4					
4		Atlanta	Co. 30307	_	***************************************
*		Atlanta City	Ga 30307	City	State ZIP Code
	How long employed th	City			State ZIP Code
	How long employed the	City		City _1 year	State ZIP Code
art 2: Give Details Abou		City			State ZIP Code
	t Monthly Income	city ere? 1 year	State ZIP Code	1 year	
Estimate monthly income as o	t Monthly Income	city ere? 1 year	State ZIP Code	1 year	
Estimate monthly income as of spouse unless you are separated if you or your non-filing spouse h	f the date you file this ford. ave more than one employ	ere? 1 year rm. If you have nothinger, combine the infor	State ZIP Code	1 year write \$0 in the space. Inclu	ıde your non-filing
Estimate monthly income as of spouse unless you are separated if you or your non-filing spouse h	f the date you file this ford. ave more than one employ	ere? 1 year rm. If you have nothinger, combine the infor	State ZIP Code	1 year write \$0 in the space. Inclu	ıde your non-filing
Estimate monthly income as of spouse unless you are separated if you or your non-filing spouse h	f the date you file this ford. ave more than one employ	ere? 1 year rm. If you have nothinger, combine the infor	State ZIP Code	1 year write \$0 in the space. Inclus for that person on the line	ıde your non-filing
Estimate monthly income as of spouse unless you are separated if you or your non-filing spouse helow. If you need more space, a	f the date you file this ford. ave more than one employ attach a separate sheet to the	ere? 1 year rm. If you have nothin yer, combine the inforthis form.	State ZIP Code ng to report for any line, rmation for all employers	1 year write \$0 in the space. Incluses for that person on the line	ude your non-filing
Estimate monthly income as of spouse unless you are separated if you or your non-filing spouse helow. If you need more space, a	f the date you file this ford. ave more than one employ attach a separate sheet to the lary, and commissions (but a separate sheet)	city ere? 1 year rm. If you have nothinger, combine the inforthis form.	State ZIP Code ng to report for any line, rmation for all employers	1 year write \$0 in the space. Inclus for that person on the line	ıde your non-filing
Estimate monthly income as of spouse unless you are separated if you or your non-filing spouse helow. If you need more space, at List monthly gross wages, sa deductions). If not paid monthly	f the date you file this ford. ave more than one employ attach a separate sheet to the lary, and commissions (b., calculate what the monthless)	city ere? 1 year rm. If you have nothinger, combine the inforthis form.	ng to report for any line, rmation for all employers For Debtor 1 2. \$ 0.00	1 year write \$0 in the space. Inclus for that person on the line	ıde your non-filing
Estimate monthly income as of spouse unless you are separated if you or your non-filing spouse helow. If you need more space, a	f the date you file this ford. ave more than one employ attach a separate sheet to the lary, and commissions (b., calculate what the monthless)	city ere? 1 year rm. If you have nothinger, combine the inforthis form.	ng to report for any line, mation for all employers For Debtor 1	1 year write \$0 in the space. Inclus for that person on the line	ıde your non-filing

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Calvin Joseph Datrice 23-56465 Debtor 1 Case number (if know For Debtor 1 For Debtor 2 or non-filing spouse 0.00 Copy line 4 here..... 5. List all payroll deductions: 0.00 5a. Tax, Medicare, and Social Security deductions 5a. 0.00 5b. Mandatory contributions for retirement plans 5b. 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 5e. Insurance 5e. 0.00 5f. Domestic support obligations 5f. 0.00 5g. Union dues 5a 0.00 5h. Other deductions. Specify: 5h 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 0.00 0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 8a. monthly net income. 0.00 8b. Interest and dividends 8b. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 8c. 0.00 8d. Unemployment compensation 8d. 0.00 8e. Social Security 8e 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 285.00 Specify: 8f. 0.00 8g. Pension or retirement income 8g. 0.00 8h. Other monthly income. Specify: 8h. 285.00 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. Calculate monthly income. Add line 7 + line 9. 285.00 285.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 11. + Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 285.00 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? ☐ No. plan to find employment Yes. Explain:

Fill in this information to identify y	our case:			
Debtor 1 Calvin	Joseph Datrice	01 1 1 1 1 1		
First Name	Middle Name Last Name	Check if this		
Debtor 2 (Spouse, if filing) First Name	Middle Name Last Name	An amend	ded filing nent showing postp	potition chapter 13
United States Bankruptcy Court for the: N	orthern District of Georgia	Taxana II	as of the following	•
Case number 23-56465		MM / DD /	YYYY	
(If known)				
Official Form 106J				
Schedule J: You	ır Expenses	of the second se		12/15
Be as complete and accurate as posinformation. If more space is needed (if known). Answer every question.				
Part 1: Describe Your House	sehold		*	
1. Is this a joint case?	¥			
No. Go to line 2.				
Yes. Does Debtor 2 live in a se	eparate household?			*
☐ No☐ Yes. Debtor 2 must file	Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.		
2. Do you have dependents?	☑ No		Denondentie	Dage dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents'				□ No □ Yes
names.				☐ No
				Yes
				□ No
			-	Yes
				☐ No ☐ Yes
				☐ No
				Yes
Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ Yes			
	M4bly P			2
Part 2: Estimate Your Ongoin				
Estimate your expenses as of your expenses as of a date after the bank				
applicable date. Include expenses paid for with non-	-cash government assistance if you	ı know the value of		
such assistance and have included			Your expe	nses
The rental or home ownership eany rent for the ground or lot.	xpenses for your residence. Include	first mortgage payments and	4. \$	1,091.00
If not included in line 4:				
4a. Real estate taxes			4a. \$	
4b. Property, homeowner's, or re	enter's insurance		4b. \$	
4c. Home maintenance, repair, a	and upkeep expenses		4c. \$	
4d. Homeowner's association or	condominium dues		4d. \$	

Debtor 1 Calvin Joseph Datrice
First Name Middle Name Last Name

Case number (if known) 23-56465

		Your exp	enses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6. Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	140.91
6b. Water, sewer, garbage collection	6b.	\$	90.41
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	63.00
6d. Other Specify:	6d.	\$	0.00
7. Food and housekeeping supplies	7.	\$	300.00
8. Childcare and children's education costs	8.	\$	0.00
9. Clothing, laundry, and dry cleaning	9.	\$	20.00
Personal care products and services	10.	\$	20.00
Medical and dental expenses	11.	\$	0.00
2. Transportation. Include gas, maintenance, bus or train fare.			120.00
Do not include car payments.	12.	\$	
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
4. Charitable contributions and religious donations	14.	\$	0.00
 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	0.00
15d. Other insurance. Specify:	15d.	\$	0.00
6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
7. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	568.00
17b. Car payments for Vehicle 2	17b.	\$	0.00
17c. Other. Specify:	17c.	\$	0.00
17d. Other. Specify:	17d.	\$	0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
9. Other payments you make to support others who do not live with you.		Ψ	
Other payments you make to support others who do not live with you. Specify:	19.	\$	0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inco	me.		
20a. Mortgages on other property	20a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00

ebtor 1	Calvin First Name	Middle Name	Joseph Last Name	Datrice	Case number (if kn	own) 23-	56465	
. Other	. Specify:					21.	+\$	0.00
Calcu	late your mor	nthly expens	ses.					
22a. A	Add lines 4 thro	ough 21.				22a.	\$	2,413.32
22b. C	Copy line 22 (m	nonthly expe	nses for Debtor 2), if	any, from Official Form 1	06J-2	22b.	\$	0.00
22c. A	odd line 22a an	nd 22b. The	result is your monthly	expenses.		22c.	\$	2,413.32
	ate your mon	•					¢	285.00
23a. (Copy line 12 (y	our combine	ed monthly income) fro	om Schedule I.		23a.	Φ	
23b. (Copy your mor	nthly expens	es from line 22c abov	e.		23b.	- \$	2,413.32
	Subtract your r		enses from your mont net income.	hly income.		23c.	\$	-2,128.32
					*			
4. Do you	u expect an in	icrease or d	lecrease in your exp	enses within the year a	fter you file this form?			
For ex	ample, do you	expect to fir	nish paying for your ca	ar loan within the year or	do you expect your			
				f a modification to the ter				
☐ No.	· ·							
☑ Yes	Explain	_{here:} I plan	to find employme	ent as soon as poss	ible.			
	na panananananananananananananananananan							
	e de montré de la constitue de							

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Fill in this in	formation to ider	tify your case:	1787	
Debtor 1	Calvin First Name	Joseph Middle Name	Datrice Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for	the: Northern District of Georgia		
Case number (If known)	23-56465		*	

☐ Check if this is an amended filing

12/15

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D: C information below.	Creditors Who Have Claims Secured by Property (Offici	al Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Family First Credit Union Description of 2017 Black Infiniti Q50 property securing debt:	□ Surrender the property. □ Retain the property and redeem it. ☑ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	☑ No ☐ Yes
Creditor's name: Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	☑ No ☐ Yes
Creditor's name: Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes
Creditor's name: Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes

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Case number (If known) 23-56465 Calvin Joseph **Datrice** Debtor 1 Firet Name Middle Name Part 2: **List Your Unexpired Personal Property Leases** For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Will the lease be assumed? Describe your unexpired personal property leases Lessor's name: The Retreat At Edgewood Townhomes ☐ No Y Yes Description of leased Unit 711, 2 bedroom 1.5 baths property: ☐ No Lessor's name: ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease. Calvin Joseph Datrice III Signature of Debtor 1 Signature of Debtor 2 Date 07/07/2023 MM / DD / YYYY

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Fill in this i	nformation to ide	ntify your case:		
Debtor 1	Calvin	Joseph	Datrice	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing) First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	r the: Northern District of G	eorgia	
Case number				
	(If known)			

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your asse Value of w	ets vhat you own
Schedule A/B: Property (Official Form 106A/B)	¢	0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$	0.00
1c. Copy line 63, Total of all property on Schedule A/B	\$	0.00
rt 2: Summarize Your Liabilities		
	Your lial	
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	25,641.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
зь. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$	37,629.00
Your total liabilities	\$	63,270.00
rt 3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	285.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,413.32

Datrice

Calvin

First Name

Debtor 1

Joseph

Last Name

Middle Name

Case number (if known) 23-56465

Pa	art 4: Answer These Questions for Administrative and Statistical Records	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?	
	 ✓ No. You have nothing to report on this part of the form. Check this box and submit this form ✓ Yes 	m to the court with your other schedules.
7.	What kind of debt do you have?	
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an infamily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	ndividual primarily for a personal, es. 28 U.S.C. § 159.
	Your debts are not primarily consumer debts. You have nothing to report on this part of this form to the court with your other schedules.	of the form. Check this box and submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly inco Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ome from Official \$0.00

9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	•
		Total claim
	From Part 4 on Schedule E/F, copy the following:	
	On Demostic support chilipations (Conv. line So.)	¢ 0.00
	9a. Domestic support obligations (Copy line 6a.)	Ψ
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
	9d. Student loans. (Copy line 6f.)	\$0.00
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	\$0.00
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
	9g. Total. Add lines 9a through 9f.	\$0.00

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Debtor 1	Calvin	Joseph	Datrice	
	First Name	Middle Name	Last Name	
Debtor 2				2
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	r the: Northern District of Georg	ia · [-
Case number	23-56465			

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NC	OT an attorney to help you fill out bankruptcy forms?
☑ No	
☐ Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
*	
Under penalty of perjury, I declare that I have re that they are true and correct.	ad the summary and schedules filed with this declaration and
,	
X Calvin Joseph Datrice III	*
Signature of Debtor 1	Signature of Debtor 2
07/07/0000	
Date 07/07/2023	Date
MM / DD / YYYY	WIW 7 DD 7 1111

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Debtor 1	Calvin	Joseph	Datrice		
Deptor 1	First Name		iddle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	М	iddle Name	Last Name	
United States I	Bankruptcy C	ourt for the: North	ern District of Geor	gia	-

Check the appropriate box as directed in lines 40 or 42:
According to the calculations required by this Statement:
1. There is no presumption of abuse.
2. There is a presumption of abuse.
☐ Check if this is an amended filing

Official Form 122A-2

Chapter 7 Means Test Calculation

04/22

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1:	Determine Your Adjusted Income				
7					
1. Copy	your total current monthly income	Copy line 11 from Offici	al Form 122A-1 here →	\$	0.00
2. Did y	ou fill out Column B in Part 1 of Form 122A–1?				
Z N	lo. Fill in \$0 for the total on line 3.				
□ Y	es. Is your spouse filing with you?				
Ţ	■ No. Go to line 3.				
C	Yes. Fill in \$0 for the total on line 3.				
	ist your current monthly income by subtracting any part of your speed of expenses of you or your dependents. Follow these steps:	pouse's income not used	d to pay for the		
	ne 11, Column B of Form 122A–1, was any amount of the income you larly used for the household expenses of you or your dependents?	reported for your spouse N	NOT		
2	No. Fill in 0 for the total on line 3.				
	es. Fill in the information below:				
	State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents	Fill in the amount you are subtracting from your spouse's income			
,		\$			
		\$			
		+ \$			
	Total	\$0.00	Copy total here	- \$	0.00
4. Adju	ust your current monthly income. Subtract the total on line 3 from line	e 1.	-	\$	0.00

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Debtor 1

Calvin

Joseph

Datrice

Case number (if known) 23-56465

Part 2:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A–1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

1

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 562.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person

\$____79.00

7b. Number of people who are under 65

x 1

7c. Subtotal. Multiply line 7a by line 7b.

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person

154.00

7e. Number of people who are 65 or older

x 0

7f. Subtotal. Multiply line 7d by line 7e.

0.00 Copy here → + \$ 0.00

7g. Total. Add lines 7c and 7f.....

\$____79.00

79.00

Copy total here

\$___79.00

Debtor 1	Calvin First Name	Joseph Middle Name	Datrice Last Name	Case number (if known) 23-56465	
Local	Standards	You must use	the IRS Local Standards to	o answer the questions in lines 8-15.	
		on from the IRS		m has divided the IRS Local Standard for housing for	
		•	e and operating expenses	s	
■ Но	using and util	ities – Mortgage	or rent expenses		
To an	swer the ques	tions in lines 8-	9, use the U.S. Trustee P	Program chart.	
			link specified in the separate bankruptcy clerk's office.	ate instructions for this form.	
				es: Using the number of people you entered in line 5, fill in the ting expenses. \$\$	14.00
9. Ho	using and uti	lities – Mortgag	e or rent expenses:		
9a			ou entered in line 5, fill in the rent expenses	the dollar amount listed \$_1,300.00	
9b	. Total average	monthly payme	nt for all mortgages and oth	her debts secured by your home.	
	contractually	he total average due to each sect hen divide by 60	monthly payment, add all a ured creditor in the 60 mont.	amounts that are ths after you file for	
	Name of the	creditor		Average monthly payment	
	The Retro	eat at Edgewo	ood Townhomes	\$ <u>1,091.00</u>	
				\$	
				+ s	
		Total :	average monthly payment	\$ 1,091.00 Copy here - \$ 1,091.00 Repeat this amount on line 33a.	
9с	Subtract line		ne monthly payment) from I	line 9a (<i>mortgage or</i> \$ \$ \$	0.00
th	e calculation			the IRS Local Standard for housing is incorrect and affects \$ ditional amount you claim.	0.00
	xplain hy:				
11. Lo	cal transporta	ation expenses:	Check the number of vehic	cles for which you claim an ownership or operating expense.	
	0. Go to line	14.			
		e 12. Go to line 12.			
12. V e	ehicle operation	on expense: Usi ses, fill in the Op	ng the IRS Local Standards	ls and the number of vehicles for which you claim the r your Census region or metropolitan statistical area. \$30	0.00

or 1	Calvin	Joseph Middle Name	Datrice Last Name		Case nu	mber (if knowi	23-56465		
***************************************	Priot Name	middle ivallie	Lastrame				***************************************		
for e	each vehicle	below. You may n	ense: Using the IRS Lo not claim the expense i expense for more thar	f you do not make ar					
Veh	nicle 1 De	escribe Vehicle 1:	2017 Black Infin	iti Q50					
13a	. Ownership	o or leasing costs	using IRS Local Stand	ard		\$	629.00		
13b		•	or all debts secured by						
		lude costs for leas							
	amounts t	hat are contractua	onthly payment here a ally due to each secure y. Then divide by 60.	nd on line 13e, add and creditor in the 60 r	all nonths				
	Name	of each creditor for	r Vehicle 1	Average monthly payment					
	Family	First Credit U	Inion	\$569.0	0				
				+ \$	-				
		Total averaç	ge monthly payment	\$569.0	O Copy	- \$	569.00	Repeat this amount on line 33b.	
								7.	
								Copy net	
13c		e 1 ownership or le		ss than \$0, enter \$0.		\$	60.00	Vehicle 1 expense	. 6
13c			ease expense 3a. If this amount is les	ss than \$0, enter \$0.		\$	60.00	Vehicle 1	\$6
	Subtract lin	ne 13b from line 13	3a. If this amount is les	ss than \$0, enter \$0.	,	\$	60.00	Vehicle 1 expense	\$6
	Subtract lin			ss than \$0, enter \$0.		\$	60.00	Vehicle 1 expense	\$6
	Subtract lin	ne 13b from line 13	3a. If this amount is les	ss than \$0, enter \$0.		\$	60.00	Vehicle 1 expense	\$6
	Subtract lin	ne 13b from line 13	3a. If this amount is les			\$	60.00	Vehicle 1 expense	\$6
Vel	Subtract lir nicle 2 De . Ownership . Average r	ne 13b from line 13 escribe Vehicle 2: p or leasing costs monthly payment f	N/A using IRS Local Stand	dard			60.00	Vehicle 1 expense	\$6
Vel	Subtract lir nicle 2 De . Ownership . Average r	ne 13b from line 13 escribe Vehicle 2: p or leasing costs	N/A using IRS Local Stand	dard			60.00	Vehicle 1 expense	\$6
Vel	Subtract lin	ne 13b from line 13 escribe Vehicle 2: p or leasing costs monthly payment f	N/A using IRS Local Stand for all debts secured by sed vehicles.	dard			60.00	Vehicle 1 expense	\$6
Vel	Subtract lin	escribe Vehicle 2: p or leasing costs monthly payment folude costs for leas	N/A using IRS Local Stand for all debts secured by sed vehicles.	dardy Vehicle 2. Average monthly payment			60.00	Vehicle 1 expense	\$6
Vel	Subtract lin	escribe Vehicle 2: p or leasing costs monthly payment folude costs for leas	N/A using IRS Local Stand for all debts secured by sed vehicles.	dardy Vehicle 2. Average monthly payment			60.00	Vehicle 1 expense	\$6
Vel	Subtract lin	escribe Vehicle 2: p or leasing costs monthly payment folude costs for leas	N/A using IRS Local Stand for all debts secured by sed vehicles.	dardy Vehicle 2. Average monthly payment			60.00	Vehicle 1 expense	\$6
Vel	Subtract lin	escribe Vehicle 2: p or leasing costs monthly payment folude costs for leas	N/A using IRS Local Stand for all debts secured by sed vehicles.	dardy Vehicle 2. Average monthly payment	<u>0</u>		60.00	Vehicle 1 expense here	\$6
Vel	Subtract lin	escribe Vehicle 2: p or leasing costs monthly payment folude costs for leas of each creditor for	N/A using IRS Local Stand for all debts secured by sed vehicles.	Average monthly payment	<u>0</u>		60.00	Vehicle 1 expense	\$6
13d	Subtract lin	escribe Vehicle 2: p or leasing costs monthly payment folude costs for leas of each creditor for	N/A using IRS Local Stand for all debts secured by sed vehicles. r Vehicle 2	Average monthly payment	0 0 copy		60.00	Repeat this amount on line 33c. Copy net	\$6
13d	Subtract lin	escribe Vehicle 2: p or leasing costs monthly payment follude costs for leas of each creditor for	N/A using IRS Local Stand for all debts secured by sed vehicles. r Vehicle 2	Average monthly payment	0 0 Copy here→	\$	60.00	Repeat this amount on line 33c.	\$6
13d 13e	Subtract lin	escribe Vehicle 2: p or leasing costs monthly payment foliude costs for leas of each creditor for Total avera e 2 ownership or leas ne 13e from 13d. I	N/A using IRS Local Stand for all debts secured by sed vehicles. r Vehicle 2	Average monthly payment	0 0 Copy here→	\$\$	0	Repeat this amount on line 33c. Copy net Vehicle 2 expense	\$

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Case number (if known) 23-56465 Calvin Joseph **Datrice** Debtor 1 First Name In addition to the expense deductions listed above, you are allowed your monthly expenses for Other Necessary Expenses the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, selfemployment taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your 0.00 pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 0.00 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. 0.00 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 0.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or 0.00 ■ for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it 150.00 is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. 24. Add all of the expenses allowed under the IRS expense allowances. 150.00 Add lines 6 through 23.

Debtor 1	Calvin	Joseph	Datrice	Case number (if known) 23-56465	
	First Name	Middle Name	Last Name		
Ado	litional Expense	Deductions		ional deductions allowed by the Means Test. Idude any expense allowances listed in lines 6-24.	
i				th savings account expenses. The monthly expenses for health accounts that are reasonably necessary for yourself, your spouse, or your	
	Health insurance	•		\$0.00	
	Disability insurar	nce		\$0.00	
	Health savings a	ccount		+ \$0.00	
	Total			\$ Copy total here→	\$0.00
	Do you actually s	spend this total	amount?		
	No. How muc			€ 0.00	
	☑ Yes	,		Ψ	
l	continue to pay for nousehold or me	or the reasonab mber of your im	e and necessary of mediate family wh	rold or family members. The actual monthly expenses that you will care and support of an elderly, chronically ill, or disabled member of your to is unable to pay for such expenses. These expenses may include gram. 26 U.S.C. § 529A(b).	\$0.00
	•			ably necessary monthly expenses that you incur to maintain the safety of vention and Services Act or other federal laws that apply.	\$0.00
1	By law, the court	must keep the	nature of these exp	penses confidential.	
	f you believe tha 3, then fill in the e	t you have hom excess amount our case trustee	e energy costs that of home energy co documentation of	gy costs are included in your insurance and operating expenses on line 8, it are more than the home energy costs included in expenses on line ists. your actual expenses, and you must show that the additional amount	\$120.00
	per child) that you elementary or se You must give you reasonable and r	u pay for your d condary school our case trustee necessary and r	ependent children documentation of not already accoun	who are younger than 18. The monthly expenses (not more than \$189.58* who are younger than 18 years old to attend a private or public your actual expenses, and you must explain why the amount claimed is ted for in lines 6-23.	\$0.00
	than the combine food and clothing To find a chart sh this form. This ch	ed food and clot gallowances in nowing the max nart may also be	hing allowances in the IRS National S mum additional al available at the b	nthly amount by which your actual food and clothing expenses are higher the IRS National Standards. That amount cannot be more than 5% of the tandards. lowance, go online using the link specified in the separate instructions for ankruptcy clerk's office. is reasonable and necessary.	\$280.00
				ant that you will continue to contribute in the form of cash or financial n. 26 U.S.C. § 170(c)(1)-(2).	+ \$0.00
	Add all of the a		nse deductions.		\$ <u>40</u> 0.00

for 1 Calvin Joseph Datrice First Name Middle Name Last Name				Case nu	Case number (if known) 23-56465					
Deductio	ns for Deb	t Payment							-	
33. For de	bts that ar	e secured by an in	terest in property that	you own, incl	uding home mo	rtgages, v	ehicle			
		•	n lines 33a through 33e							
credito	culate the to or in the 60	otal average monthly months after you file	y payment, add all amou e for bankruptcy. Then di	ints that are co vide by 60.	intractually due to	each sec	ured			
						Average	monthly			
		s on your home:				paymen				
33a.	Copy line 9	b here				\$	1,091.00			
	Loans on	your first two vehic	cles:							
33b.	Copy line 1	3b here			→	\$	569.00			
33c.	Copy line 1	3e here				\$	0			
33d.	List other s	ecured debts:								
	Name of	each creditor for othe	r Identify proper	rtv that	Does payment					
	secured o		secures the de		include taxes or insurance?					
	N/A				☐ No	¢	0.00			
	1.11.1				☐ Yes	Ψ	-			
)				☐ No ☐ Yes	\$				
					- 103					
					☐ No☐ Yes	+ \$				
22 - To	tal avorage	monthly naymont	Add lines 22s through 23	24		. \$	0.00	Copy total		0.
33e. 10	itai average	monthly payment.	Add lines 33a through 33	ou		. •		here→	\$	
34. Are ar	y debts th	at you listed in line	e 33 secured by your p	rimary resider	nce, a vehicle,					
or oth	er propert	y necessary for yo	ur support or the supp	ort of your de	ependents?					
	Go to lin				s percentagos variantes					
YZ YE	listed in	line 33, to keep pos	nust pay to a creditor, in session of your property the information below.	(called the <i>cur</i>	re amount).					
	Name of	f the creditor	Identify property that secures the debt	Total cure amount	•	Month	nly cure			
	The F	tetreat at Edg∈	Apartment	\$ <u>6,441.</u>	16 ÷ 60 =	\$	107.35			
	Famil	y First Credit L	Car	_{\$} 1,707.	00 ÷ 60 =	\$	28.45			
				œ.	÷ 60 =	. •	0.00			
				Ψ		• Φ	***************************************	Copy total		405
					Total	\$	135.80	here →	\$	135.
35. Do v a	u owe anv	priority claims suc	ch as a priority tax, chi	ld support, or	alimony –					
	re past du	e as of the filing da	te of your bankruptcy							
_		0.0								
	o. Go to lin		of these priority claims	Do not include	current or					
_	es. Fill in the	e total amount of all	of these priority claims. In as those you listed in li		current or					

Debtor 1	Calvin First Name	Joseph Middle Name	Datrice Last Name		Case number (if known	23-56465	
	riistivaille	Wildlie Name	Lastivanie				
	For more informa	ation, go online u		.S.C. § 109(e). htcy Basics specified in the savailable at the bankruptcy			
¥	No. Go to line	37.					- Committee of the Comm
	Yes. Fill in the	following informa	ition.				
	Projecte	d monthly plan p	ayment if you were filing	under Chapter 13	\$		de la companya de la
	Administ	trative Office of the arolina) or by the		elist issued by the (for districts in Alabama and ted States Trustees (for all	d x	_	
	link spec		ate instructions for this t	ur district, go online using t form. This list may also be	he		
	Average	monthly adminis	trative expense if you w	ere filing under Chapter 13	\$	Copy total here →	\$
				1	3	***************************************	
37. A	dd all of the ded dd lines 33e thro	ductions for del ough 36	t payment.				\$_135.80
Tota	Deductions fro	om Income					Distriction
38. A	dd all of the allo	wed deduction	s.				Occasional
Co	py line 24, All of pense allowance	the expenses ales	lowed under IRS	\$150.00			
Co	py line 32, All of	the additional ex	pense deductions	\$400.00			
Co	py line 37, All of	the deductions	or debt payment	+ \$135.80			
			Total deductions	\$685.80	Copy total her	•	\$685.8
Part	3: Determ	ine Whether T	here Is a Presumpt	ion of Abuse			
39. C	alculate month	ly disposable in	come for 60 months				
3	9a. Copy line 4	, adjusted curren	t monthly income				~
3	9b. Copy line 3	8, Total deductio	ns	- \$685.80			
3	,	posable income. e 39b from line 3	11 U.S.C. § 707(b)(2). 9a.	\$685.80	Copy here→	\$685.80	
	For the nex	xt 60 months (5 y	ears)			x 60	4
					Control of the Contro	-41 148 00 Copy	
3	9d. Total . Multi	ply line 39c by 6)		E.o.	\$ -41,148.00 Copy here	\$ <u>-41,148</u> 00
40. F	ind out whether	r there is a pres	umption of abuse. Che	ck the box that applies:		y	
4	The line 39d Part 5.	is less than \$9,0	75*. On the top of page	1 of this form, check box 1,	There is no presu	umption of abuse. Go to	*
			5,150*. On the top of page pecial circumstances. T	ge 1 of this form, check box hen go to Part 5.	: 2, There is a pres	sumption of abuse. You	
	The line 39d	is at least \$9,07	5*, but not more than \$	15,150*. Go to line 41.			
	* Subject to a	adjustment on 4/	01/25, and every 3 years	after that for cases filed on	or after the date	of adjustment.	

ebtor 1 Calvin Joseph Datrice First Name Middle Name Last Name					Case number (if known) 23-56465					
	FIRST Name	Middle Name	Last Name							
41. 41a.	Summary of	Your Assets and	Liabilities and Certa	ecured debt. If you fille in Statistical Information on that form	Schedules	\$ 37,629.00 × .25				
4 1b				11 U.S.C. § 707(b)(2)(A		\$_9,407.25	Copy here	\$_9,407,25		
is e	ermine wheth nough to pay ck the box tha	25% of your un	ou have left over af secured, nonpriorit	ter subtracting all allo y debt.	wed deductions					
	Line 39d is le Go to Part 5.	ss than line 41b	. On the top of page	1 of this form, check bo	x 1, There is no presur	mption of abuse.				
	Line 39d is ed of abuse. You	qual to or more may fill out Part	than line 41b. On the 4 if you claim special	e top of page 1 of this fo circumstances. Then g	orm, check box 2, <i>Ther</i> o to Part 5.	e is a presumption				
Part 4:	Give Deta	ils About Spe	cial Circumstanc	ces						
43. Do you reason	have any spe able alternati	ecial circumstar ve? 11 U.S.C. §	nces that justify add 707(b)(2)(B).	litional expenses or ac	ljustments of current	monthly income	for which	there is no		
☐ No.	Go to Part 5		ä							
☐ Yes	Fill in the foll for each iten	owing information. You may inclu	n. All figures should r de expenses you liste	reflect your average mo ed in line 25.	nthly expense or incom	ne adjustment				
	adjustments	ve a detailed exp necessary and r income adjustm	easonable. You must	al circumstances that ma t also give your case tru	ake the expenses or inc stee documentation of	come your actual				
	Give a detail	ed explanation of	the special circumsta	nces		Average monthly or income adjust				
						\$				
						\$				
						\$				
						\$				
Part 5:	Sign Belov	v					•			
	By signing h	ere, I declare un	der penalty of perjury	that the information on	this statement and in a	any attachments is	true and o	correct.		
		Joseph Datri	ce III	*						
	-	of Debtor 1			Signature of Debtor 2					
		/07/2023 / DD / YYYY			Date					

Access to Capital Entrepreneurs 3173 Highway 129N Cleveland, Ga 30528

Capital One PO Box 31293 Salt Lake City, UT 84131

Family First Credit Union 3604 Atlanta Ave Suite 16 Hapeville, Ga 30354

Lending Point LLC 1201 Roberts Blvd NW Ste Kennesaw, Ga 30144

OneMain Financial 100 International Drive 15th floor Baltimore, MD 21202

The Retreat at Edgewood Townhomes 150 Hutchinson ST NE Atlanta, Ga 30307